

## R430-70-14. CHILD HEALTH.

- (1) No child may be subjected to physical, emotional, or sexual abuse while in care.

### Rationale / Explanation

*Serious physical abuse of children by caregivers usually occurs at times of high stress for the caregiver. For this reason, it is important for caregivers to have ways of taking breaks and seeking assistance when they are stressed. CFOC, pgs. 117-118 Standard 3.058*

*The presence of multiple caregivers also greatly reduces the risk of serious abuse to children. Abuse tends to occur in privacy and isolation, and especially in toileting areas. CFOC, pg. 118 Standard 3.059*

*Corporal punishment may be physically and emotionally abusive, or may easily become abusive. Research links corporal punishment with negative effects such as later criminal behavior and learning impairments. Other inappropriate discipline methods such as humiliation or using abusive language may also be emotionally abusive. CFOC, pgs. 65-66 Standard 2.042; pg. 337 Standard 8.009*

### Enforcement

*Always Level 1 Noncompliance.*

- (2) All staff shall follow the reporting requirements for witnessing or suspicion of abuse, neglect, and exploitation found in Utah Code, Section 62A-4a-403 and 62A-4a-411.

### Rationale / Explanation

*Reporting of suspected child abuse or neglect is required by Utah law. Suspected abuse and neglect must be reported to law enforcement or Child Protective Services. Reporting suspected abuse or neglect to one's supervisor only does not meet the legal requirement to report suspected abuse and neglect. CFOC, pgs. 116-117 Standards 3.053, 3.055*

*See CFOC, pg. 420 Appendix K for a list of signs of possible abuse and neglect, and pg. 421 Appendix L for a list of risk factors for abuse and neglect.*

### Enforcement

*Always Level 1 Noncompliance.*

- (3) The use of tobacco, alcohol, illegal substances, or sexually explicit material on the premises or in program vehicles is prohibited any time that children are in care.

### Rationale / Explanation

*Scientific evidence has linked respiratory health risks to secondhand smoke. No children, especially those with respiratory problems, should be exposed to additional risk from the air they breathe. Young children exposed to secondhand smoke are at risk of developing bronchitis, pneumonia, and middle ear infections when they experience common respiratory infections. CFOC, pg. 63 Standard 2.035; pg. 111 Standard 3.041; pg. 354 Standard 8.038*

*The age, defenselessness, and lack of mature judgement of children in care make the prohibition of tobacco,*

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alcohol, and illegal substances an absolute requirement. CFOC, pg. 111 Standard 3.041; pg. 354 Standard 8.038

### **Enforcement**

*If tobacco is used when children are in care:*

- Level 1 Noncompliance for indoor use or use in vehicles when a child in care is in the vehicle.
- Level 3 Noncompliance for outdoor use.

*If alcohol or illegal substances are used when children are in care:*

- Level 1 Noncompliance if a provider is intoxicated or impaired and transports a child.
- Level 1 Noncompliance if a provider is intoxicated or impaired while a child is in care.
- Level 3 Noncompliance if a provider or anyone in the facility has been drinking or using an illegal substance, but is not intoxicated or impaired.
- Level 3 Noncompliance if another person in the facility is intoxicated or impaired.

*If sexually explicit materials are used when a child is in care:*

- Level 2 Noncompliance.
- Level 3 Noncompliance if sexually explicit materials are used in the presence of children.

- (4) **The provider shall not admit any child to the program without a signed health assessment completed by the parent which shall include:**
- (a) **allergies;**
  - (b) **food sensitivities;**
  - (c) **acute and chronic medical conditions;**
  - (d) **instructions for special or non-routine daily health care;**
  - (e) **current medications; and,**
  - (f) **any other special health instructions for the caregiver.**

### **Rationale / Explanation**

*Admission of children without this information can leave the program unprepared to deal with daily and emergency health needs of the child. CFOC, pg. 71 Standard 2.054*

*Food sensitivities can result in minor irritations (rashes, loose stools) whereas a true allergy could cause a life-threatening reaction (anaphylaxis, severe asthma attack, hives, etc.).*

### **Enforcement**

*The health assessment form used by the provider does not have to use the specific words "acute" and "chronic," which parents may not understand. As long as the health assessment asks about any medical conditions the child has, it meets this rule.*

*If the program's health assessments asks for any food or drink restrictions, this meets the requirement for (b) food sensitivities. The program does not have to use the specific words "food sensitivities."*

*If a provider indicates they **do not have** the required health assessments cite this rule. If the provider indicates they **have** any of these records, but **cannot find them** during an on-site visit, cite R430-70-9(2)(b) **only** as being*

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*out of compliance. If the provider still does not have the required record(s) on the follow-up visit, cite this rule.*

*Level 1 Noncompliance: If lack of information on a health assessment resulted in an emergency situation (seizure, allergic reaction, etc.) in which caregivers did not have the needed information.*

*Level 3 Noncompliance otherwise.*

- (5) The provider shall ensure that each child's health assessment is reviewed, updated, and signed or initialed by the parent at least annually.**

### **Rationale / Explanation**

*Admission of children without this information can leave the program unprepared to deal with daily and emergency health needs of the child. CFOC, pg. 71 Standard 2.054*

*Food sensitivities can result in minor irritations (rashes, loose stools) whereas a true allergy could cause a life-threatening reaction (anaphylaxis, severe asthma attack, hives, etc.).*

### **Enforcement**

*Level 1 Noncompliance: If lack of information on a health assessment resulted in a situation that would require medical attention, but is not life-threatening.*

*Level 3 Noncompliance otherwise.*